## Berkeley County CDBG Application for Funding CONFLICT OF INTEREST DISCLOSURE FORM

Federal Law prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the funding sources administered through this jurisdiction (1) or who are in the position to participate in a decision making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity, either for themselves or those whom they have family or business ties, during their tenure or for one year thereafter.

Therefore, please answer the following disclosure questions:

1.	. Are you currently a (Please Check One):
	Board Member Officer
	Executive Management Staff  Staff directly associated with delivery of program
2.	State position held:
3.	Are you a business partner of any Berkeley County employee(s) or member of County Council?
	(Please Check One): No Yes
	If yes, please state the name of the county employee(s) and the department or County Council Member(s):
4.	Are you an immediate family member of any Berkeley County employee(s) or member of County Council?
	(Please Check One): No Yes
	If yes, please state the name of the county employee(s) and the department or County Council Member(s):
Signatu	ure: Name:
Name of Current Employer: Date:	

24 C.F.R. §570.611 (CDBG); 24 C.F.R. §576.404 (ESG) and 2 C.F.R. §200.112 and/or any other citations applicable to any futurefunding that may be awarded to this jurisdiction.